

Village of Hinsdale 19 E. Chicago Avenue Hinsdale, IL 60521-3489

(630)789-7000

Village Website: www.villageofhinsdale.org

PUBLIC SERVICES UTILITY PERMIT APPLICATION

Date of Application: 12/11/20 Permit No: Comcost- 035 Permit Expiration Date: 02-01-2021					
Utility Company Information:	Contractor Information:				
Company Name: Comcast Cable Address: 856 Technology Way City, State, Zip: Libertyville, IL 60048	Company Name: Directional Construction Services, Inc. Address: 440 S. Dartmoor Dr. City, State, Zip: Crystal Lake, IL 60014				
Contact Person: Phillip Jones Phone Number: 224-229-4455 Email Address: Phillip_Jones@comcast.com	Contact Person: Scott Jones Phone Number: 847-875-7153 Email Address: dcsjones@gmail.com				
Cell Number: 630-688-7432 Project/Work Order Number: JB533470	Cell Number: 847-875-7153				
PROJECT LOCATION: 16 W. Birchwood Ave. Description of work covered under this permit: To install 89 feet of un ass Merrill Woods Rd. at a minimum depth of 36° along the directional bore line.	derground CATV cable by method of directional bore from 16 W. Birchwood Ave. to				
Start Date: 01/15/2021	Completion Date: 01/22/2021				
Site Plan/Details/Specifications (3 sets) included with applicate Certificate of Insurance included with application?	ion? O YES O NO O YES O NO				
Type of Utility: ComEd Nicor Communications: Fiber Optic	✓ Comcast				
Applicant Information:					
Print Name: Phillip Jones	Phone Number: 224-229-4455				
Company: Comcast Cable	Email Address: Phillip_Jones@comcast.com				
Signature:	Date: 12/11/2020				
ALL CONSTRUCTION SHALL BE DONE IN ACCORDANCE WITH THE LAT THE FOLLOWING: STANDARD SPECIFICATIONS FOR ROAD AND BRIDG RECURRING SPECIAL PROVISIONS BY THE ILLINOIS DEPARTMENT OF CONTROL DEVICES FOR STREETS AND HIGHWAYS, STANDARD SPECILLINOIS, AND THE VILLAGE OF HINSDALE SUBDIVISION ORDINANCE AND THE VILLAGE OF THE VIL	GE CONSTRUCTION & SUPPLEMENTAL SPECIFICATIONS AND TRANSPORTATION, ILLINOIS MANUAL ON UNIFORM TRAFFIC IFICATIONS FOR WATER AND SEWER MAIN CONSTRUCTION IN				
Village Use Only					
Permit Approved: YES NO					
Conditions for Approval/Reasons for Denial: RESTORE 14 DAYS OF CABLE 1 NSTALL A 48 HOURS PRIOR TO START.	ALL DISTURBED AREAS WITHIN TION · NOTIFY AFFECTED RESIDENTS				
Approved By: A-Diag	Date: 12/11/20				



856 Technology Way Libertyville, IL 60048 (224) 229-4455 FAX (847) 789-0234

REQUEST FOR PERMIT

To: Village of Hinsdale

Al Diaz

Assistant Village Engineer

19 Chicago Ave. Hinsdale, IL 60521

Comcast Application No.: JB533470

Village No.: Comcast - 00 35

Expires On: 02-01-202

Dear Al,

Application is hereby submitted by IMEG Corp. on behalf of Comcast Construction Department and Directional Construction Services, Inc. for permission to perform the work as specified below:

To install 89 feet of underground CATV cable by method of directional bore from 16 W. Birchwood Ave. to 833 Merrill Woods Rd. at a minimum depth of 36" along the directional bore line as shown on the attached drawings.

REASON FOR WORK:

To install replacement CATV cable. New CATV cable will be installed to replace existing damaged CATV cable.

SEE ATTACHED PROJECT ID NUMBER JB533470 PERMIT APPLICATION DRAWING FOR MORE DETAILS

Note: All restoration will conform to the specifications required by the Village of Hinsdale.

NOTITY RESIDENTS 48 HOURS PRIOR TO START.

Permit Requested By: Phillip Jones, COMCAST Construction Specialist Date: 12/11/2020

Permit Granted By:

Phone: email:

Contact: Phillip Jones, COMCAST Construction Specialist 224.229.4455 Phillip_Jones@comcast.com

856 Technology Way, Libertyville, IL 60048 630.688.7432

Amanda Page, IMEG Corp. 847.306.6452 Amanda.J.Page@imegcorp.com 4850 Grand Ave, Gurnee, IL 60031

Scott Jones, Directional Construction Services, Inc. 847.875.7153 dcsjones@gmail.com 440 S. Dartmoor Dr. Crystal Lake, IL 60014

Client#: 854171

DIRECCON2

 $ACORD_{-}$

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/01/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND. EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER USI Insurance Services LLC 2021 Spring Road, Suite 100 Oak Brook, IL 60523 312 442-7200		CONTACT Kelly Kottke				
			610 537 4874			
		E-MAIL ADDRESS: kelly.kottke@usi.com				
		INSURER(S) AFFORDING COVERAGE	NAIC #			
		INSURER A : Westfield Insurance Company	24112			
INSURED Bissactions I Construction Construction	I Construction Construction	INSURER B : Accident Fund Ins Company of America	10166			
	I Construction Services, Inc.	INSURER C:				
111	440 S Dartmoor Drive Crystal Lake, IL 60014-8713	INSURER D:				
Ciystai La		INSURER E :				
		INSURER F:				
COVERAGES	CERTIFICATE NUMBER:	REVISION NUMBER:				

IN CI	HIS IS TO CERTIFY THAT THE POLICIES DICATED. NOTWITHSTANDING ANY RE- ERTIFICATE MAY BE ISSUED OR MAY P KCLUSIONS AND CONDITIONS OF SUCH	QUIREMEN [*] ERTAIN, T	T, TERM OR CONDITION OF ANY THE INSURANCE AFFORDED BY	CONTRACT O	R OTHER DOO DESCRIBED I	CUMENT WITH RESPECT HEREIN IS SUBJECT TO A	TO WHICH THIS
INSR LTR	TYPE OF INSURANCE	ADDL SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S
Α	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR		TRA4689317	02/27/2020	02/27/2021	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,000,000 \$500,000
-						MED EXP (Any one person)	\$5,000
						PERSONAL & ADV INJURY	\$1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$2,000,000
	POLICY X PRO- JECT LOC					PRODUCTS - COMP/OP AGG	\$2,000,000
Α	OTHER: AUTOMOBILE LIABILITY		TRA4689317	02/27/2020	02/27/2021	COMBINED SINGLE LIMIT	\$ \$1,000,000
	X ANY AUTO		110,4003317	02/2/12020	02/27/2021	(Ea accident) BODILY INJURY (Per person)	\$ 1,000,000
	OWNED SCHEDULED					BODILY INJURY (Per accident)	
	X HIRED AUTOS ONLY X AUTOS ONLY AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$
							\$
Α	X UMBRELLA LIAB X OCCUR		TRA4689317	02/27/2020	02/27/2021	EACH OCCURRENCE	\$5,000,000
	EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$5,000,000
	DED X RETENTION \$0						\$
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		WCV6189233	05/21/2020	02/27/2021	X PER OTH- STATUTE ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?					E.L. EACH ACCIDENT	\$1,000,000
	(Mandatory in NH) If yes, describe under					E.L. DISEASE - EA EMPLOYEE	\$1,000,000
	DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$1,000,000
	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC Vorkers Comp Information **	LES (ACORD	101, Additional Remarks Schedule, may	be attached if me	ore space is requi	ired)	

Proprietors/Partners/Executive Officers/Members Excluded: Joe Auriemma, Jack M. Giannini, Jack E. Giannini

CERTIFICATE HOLDER	CANCELLATION
Village of Hinsdale 19 E Chicago Ave Hinsdale, IL 60521	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
77	AUTHORIZED REPRESENTATIVE
	adomos a Chiffeen

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